

10/534 940

**DECLARATION, PETITION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

(Check one):

- ☐ Declaration Submitted with Initial Filing
☒ Declaration Submitted after Initial Filing

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR PROVIDING ON-LINE GAME

the specification of which:

☐ is attached hereto.

OR

☒ was filed on 13 November 2003 as PCT International Application Number PCT/KR2003/002440 and U.S. Application No. 10/534,940.

☐ and was amended by PCT Article 19 Amendment on _____ (if applicable),

☐ and was amended by PCT Article 34 Amendment on _____ (if applicable).

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

PRIORITY CLAIM

(Check one):

- ☐ no such applications have been filed.
- ☒ such applications have been filed as follows

1) **FOREIGN PRIORITY CLAIM:** I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (dd/mm/yyyy)	Priority Not Claimed	Certified Copy Attached	
				Yes	No
10-2002-0070275	KR	13/11/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

2) **PROVISIONAL PRIORITY CLAIM:** I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Provisional Application Number(s)	Filing Date (dd/mm/yyyy)

☐ Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

3) **U.S./PCT PRIORITY CLAIM:** I hereby claim the benefit under Title 35, United States Code, §120 of any United States application or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (dd/mm/yyyy)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

POWER OF ATTORNEY:

I hereby appoint:

All practitioners at Customer Number 00959

all of **Lahive & Cockfield, LLP**, 28 State Street, Boston, Massachusetts 02109, jointly, and each of them severally, my attorneys at law/patent agent(s), with full power of substitution, delegation and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the U. S. Patent and Trademark Office connected therewith.

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from **NC SOFT CORPORATION** as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

Please mail all correspondence to Anthony A. Laurentano at Customer Number 00959, whose address is:

Lahive & Cockfield, LLP
28 State Street
Boston, Massachusetts 02109

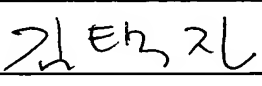

Please direct telephone calls to: Anthony A. Laurentano at (617) 227-7400.

Please direct facsimiles to: (617) 742-4214

Wherefore I petition that letters patent be granted to me for the invention or discovery described and claimed in the attached specification and claims, and hereby subscribe my name to said specification and claims and to the foregoing declaration, power of attorney, and this petition.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00

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Inventor's signature 	Date May 2, 2005
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Residence	
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Full name of third inventor	
Inventor's signature	Date
Residence	
Citizenship	
Post Office Address (if different)	

Full name of fourth inventor	
Inventor's signature	Date
Residence	
Citizenship	
Post Office Address (if different)	